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TRANSMITTAL  
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

6

Application Number	09/897,568
Filing Date	07/02/2001
First Named Inventor	James E. Dickens
Art Unit	3632
Examiner Name	Steven M. Marsh

Attorney Docket Number 0220-039

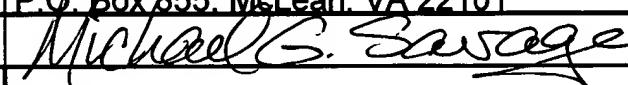
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## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final.	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
By mail		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Potomac Patent Group PLLC P.O. Box 855, McLean, VA 22101
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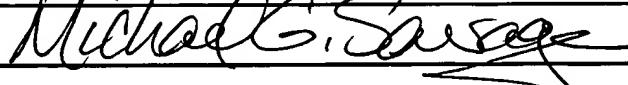
Signature	
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Printed name	Michael G. Savage
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Date	December 7, 2004	Reg. No.	32,596
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## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	
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Typed or printed name	Michael G. Savage	Date	Dec. 7, 2004
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

James E. Dickens

Application No.: 09/897,568

Title: Cable Feed Bushing and Method of  
Installing a Cable Through A Wall or Other  
Structure

Group Art Unit: 3632

Examiner: Steven M. Marsh

### SUBMISSION OF FORMAL DRAWINGS

U.S. Commissioner for Patents

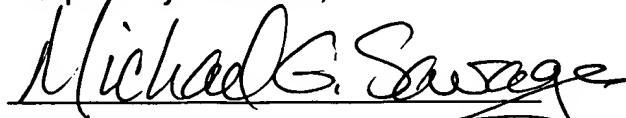
P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sirs:

Enclosed please find formal drawing for the above-mentioned application. If the undersigned can be of any assistance to the Examiner, please contact the undersigned at the number set forth below.

Respectfully submitted,

A handwritten signature in black ink that reads "Michael G. Savage".

Michael G. Savage  
Reg. No. 32,596

Dated: Dec 7, 2004

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